## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

FILING DATE

APPLICANT(S)

SERIAL NO.

CLAIMS

|               | AS          | FILED  | 1st AME | NDMENT   | AFTER 2nd AMENDMENT                              |  |
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\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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